

Attorney Docket No.: 0190125

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Duncan, et al.

SERIAL NO.: 09/679,854 FILED: October 5, 2000

FOR: Programmable Image Transform Processor

HONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.

☐ The fee has been calculated as shown below:

☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	20	MINUS **20	* = 0	x 50	x 25	\$
INDEPENDENT	3	MINUS ***3	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.

** If the number of Total Claims previously paid for is less than 20, write "20" in this space.

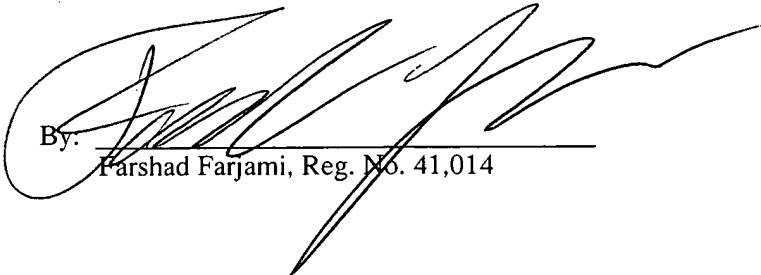
*** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

- ☐ Total fee for Supplemental Information Disclosure Statement \$ _____
- ☐ Enclosed is the total fee of \$ ____ (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-0731 in the amount of \$ _____
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

Date:

12/21/04

By:


Farshad Farjami, Reg. No. 41,014

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on:

Date

12/21/04

Signature

Christine Carter

Christina Carter

Typed or Printed Name of Person Mailing Paper and/or Fee

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Patent Application Serial No.: 09/679,854
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: **Duncan, et al.**

Application Serial No.: **09/679,854**

Filed: **October 5, 2000**

For: **Programmable Image Transform Processor**

Art Unit: 2612

Examiner: Ye, Lin

AMENDMENT AFTER NOTICE OF ALLOWANCE UNDER 37 CFR § 1.312

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment is pursuant to 37 CFR § 1.312 after Notice of Allowance dated
December 7, 2004, in the above-referenced patent application.